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indicated unless correcte maintenance fee notifica	ed below or directed of tions.	herwise in Block 1, by (	a) specifying a new corres	pondence address; and	Vor (b) indicating a ser	parate "FEE ADDRESS" fo	
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SONNENSCHEIN NATH & ROSENTHAL LLP P.O. BOX 061080 WACKER DRIVE STATION, SEARS TOWER CHICAGO, IL 60606-1080				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
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						(Signature)	
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	AT	TORNEY DOCKET NO.	CONFIRMATION NO.	
10/568,786	02/16/2006		Shiro Uchida	<del></del>	09792909-6622	6377	
ITILE OF INVENTION	: SEMICONDUCTOR I	LIGHT EMITTING DEV	ICE AND METHOD OF P	RODUCING THE SAI	ME		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	E TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/30/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
NIU, XINNING		2828	372-045010				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> <li>ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  SONNENSCHEIN NATH & ROSENTHAL LLP  2  3  4  HE PATENT (print or type)				
(A) NAME OF ASSIC	SNEE ATION		(B) RESIDENCE: (CITY TOKYO, JAP	and STATE OR COUI	NTRY)	ocument has been filed for	
			corporation or other private group entity Government  D. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 193140 (enclose an extra copy of this form).				
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Authorized Signature _ Typed or printed name	David R. I	Metzger (	Office.	DateApı	32919		
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